



## **Quality Council**

Tuesday, December 14, 2004

**2:00-3:30 p.m.**

Conference Room 5C, Exchange Building  
821 Second Avenue, Seattle WA 98104

### **Members Attending:**

Helen Nilon (chair), Howard Miller

### **Staff Present:**

Liz Gilbert  
Shelle Crosby  
Melisande Noe

## **I. FIRST QUARTER MENTAL HEALTH REPORT/MANAGEMENT INDICATORS**

Shelle Crosby provided background information about the management indicator reports (MIR), explaining that they were started in 1998 when United Behavioral Health still contracted with King County, as a means for the RSN to track and interpret system data from various sources. These indicators are not clinical outcomes, but provide information in areas where there can be impacts on the RSNs budget. For example, the RSN is subject to fines called “liquidated damages” if the number of admissions from King County exceeds the number of beds allocated to the county, so it is important to track inpatient admissions. The financial indicator portion of the MIR tracks revenues and expenditures to assure the RSN is on track with budget predictions. The MIR is distributed to Senior Staff Group managers, supervisors and senior staff members, and is an in-house document. When something in the report stands out or trends are identified, there may be follow-up activities which can include additional ad hoc reports that provide additional detail.

Helen asked how the question of how QC can help the RSN in relationship to these reports. Shelle recommended participation in upcoming RSN-sponsored work groups (e.g. the Performance Improvement Project’s Client Participation in Treatment). It would also be useful for the QC to review the performance indicators found in the report card that relate to client outcomes and suggest changes or additions.

The QC will continue to discuss both reports at upcoming meetings.